

Beechwords

Deborah Cerra-Tyl, Editor

Spring/Summer 2001

The Community-Based Support Services at Beechwood Center of New Jersey

Heidi J. Rubin, MS, LPC, LRC CPCRT

Director, Community Based Support Services

Every year over two million people sustain a traumatic brain injury (TBI). Many of the effects of a brain injury impact an individual's ability to function independently in the home, community, work or school. The residual side effects from the injury may include physical, emotional and cognitive difficulties. The need for cognitive rehabilitation has increased over the years due to the decrease in in-patient hospitalizations as well as the need for short-term programming. Insurance companies have reduced length of stays and reduced monies spent on rehabilitation following a traumatic brain injury.

The definition of cognitive rehabilitation put forth by the American Congress of Rehabilitation medicine states that "Cognitive remediation services are directed to achieve functional changes by reinforcing and re-establishing previously learned patterns of behavior." There has been much discussion as to where cognitive rehabilitation should occur. Many programs provide cognitive rehabilitation as part of their day or residential programs. The Community-Based Program at Beechwood Center of New Jersey (CBSS) was developed seven years ago to provide cognitive rehabilitation at the location or sites where the individual lives, works or attends school. All therapy is done at these locations. The CBSS program serves Camden, Salem, Burlington, Gloucester and Mercer counties. It has also provided therapies in the Philadelphia area.

This program was developed based on a theory that survivors of a traumatic brain injury have difficulty generalizing and transferring skills to new environments or novel situations. For example, if a cognitive therapist were to train an individual to attend to their own finances, then it would be important to utilize all the banking materials from the bank that they will frequent. Every bank has their own system for deposits and withdrawals. Training the individual to use a deposit sheet which does not correlate to the one used by their bank may only lead confusion when it comes time to complete the "real" documentation given by the bank. This is also true when retraining an individual to use a washing machine or

dryer. All brands are different. Buttons located in a variety of places. The individual may not be able to transfer or generalize from learning on one machine to another in their home.

The Community-Based Support Services treats anyone who has acquired brain injury. This includes individuals who have sustained their injury in a motor vehicle accident or from a cerebral vascular event (CVA). Mild brain injured or individuals that have sustained a concussion may also be in need of a brief period of cognitive rehabilitation. We have also treated young stroke survivors as well as those individuals with drug overdoses resulting in an anoxic event (loss of oxygen to the brain). Many of these individuals require services to either regain independence at home or re-enter the work force. The Community-Based Support Services program also works with school age children who have sustained a brain injury and need assistance returning to school.

Providing treatment in the client's environment is paramount to the success of the Community-Based Support Services Program. As those who have sustained an injury are aware, becoming a functional, independent person is one of their most important goals. Anyone who has sustained an injury can describe what they were like prior to the event. "I want my life back" is what is said at most goal setting consultations. When a therapist works with an individual within the home, the goals may be domestic as well as community based. These may include:

- ▶ Meal Preparation
- ▶ Food Shopping
- ▶ Budgeting
- ▶ Developing strategies for memory-use of checklists
- ▶ Topographical orientation
- ▶ Creating volunteer positions
- ▶ Time management strategies
- ▶ Assisting in developing a structured day

continued on next page

Beechwood

REHABILITATION SERVICES

A Community-Integrated Brain Injury Program • An affiliated service of Woods Services, Inc.
Program locations in PA & NJ • 1-800-782-3299 • www.BeechwoodRehab.com



There are a large number of survivors who wish to return to the work force. In some instances, they may have a job to return, but the majority needs assistance in finding alternative careers and searching for and sustaining a new position. The Community-Based Support Services Program has a working contract with the Division of Vocational Rehabilitation (DVR) in New Jersey. This entitles any individual with traumatic brain injury to receive vocational services to assist them in returning to work. Beechwood is available to provide vocational testing which helps to determine whether an individual can work as well as to determine what they are best suited to do. Furthermore, under the contract with DVR, job development and job coaching are also provided. Our Vocational Specialist also works with employers to help an individual facilitate the transition back to the work force. Brain injury education is provided and employers are taught the strategies needed to ensure a successful long-term placement.

The prevalence of traumatic brain injury in school age children is astounding. Most of these children require cognitive rehabilitation to assist them in developing new learning strategies. More importantly, school systems need support in developing appropriate educational plans. At times, it must be determined whether to classify a child under the special education laws. Alternatively, a plan may be developed that enables students to receive accommodations in the classroom without being classified. Many school districts do not know what a student with a TBI requires to learn in a classroom. Parents are at a loss on how to deal with their child's difficulties at school. The CBSS program teaches the student to use cognitive strategies to assist them in learning new material. The Community-Based Support Services Program provides education about TBI to all staff members working with these students.

Young children are not the only students treated by the CBSS program. We have treated many adults in post-secondary education as well as in training programs. These individuals also require assistance in developing new ways to learn. Cognitive strategies are developed along with the teaching of study and organizational skills.

The Community-Based Support Services Program has become an integral part of the Beechwood New Jersey organization. The CBSS Program has been able to provide vocational assistance to those residents who have regained enough skills to re-enter the work force. We have also assisted day program participants in returning to school with the support of the CBSS program. We consider ourselves dream makers. Our goals are the goals of the individuals we serve. Independence is of paramount importance to this program.

AN INTRODUCTION TO JO-JO

Thomas Felicetti, Ph.D.

The following story by Joe Mucci is about hope and perseverance. The writing is all his, with some very minor editorial revisions by the editor of Beechwords, Deborah Cerra-Tyl, and me.

Jo-Jo, as he is known, is surely an interesting character. He describes himself pretty well in the article, and I would only offer a few additional comments. Joe is highly inner referenced. Put more simply, I mean that he generally goes his own way. He pretty much does what he wants, when he wants it and how.

While a productive life during the day is important to Joe (a Day Program, if you will), Joe has never quite bought into our very fine, formal day program at Beechwood, New Jersey. This program offers cognitive rehabilitation and all other therapies, vocational opportunities and even runs its own small cottage industry, the Beechtree. The Beechtree manufactures and sells craft items and clients are employed in various capacities, depending upon their abilities. They may engage in business planning, sales, marketing and/or crafting of the various items.

However, as I mentioned, Jo-Jo generally avoids this Day Program like the plague. In my opinion, he finds it too externally directed, too formal and too group oriented. As I said, Joe likes it his way.

The challenge, therefore, has been to individualize Mr. Mucci's program and to harness his efforts in self directed projects and study. The achievement of his advanced degrees through independent study is the centerpiece of these efforts, but is not the only outcome. Among other accomplishments, Joe researched, prepared and delivered a lecture to staff on Brain Function and Rehabilitation. And, of course, he produced this article.

Work with Joe takes on a subtle mentoring quality, not unlike my distance learning instruction of graduate students in Disability Studies at Senior University. Despite some effects from his brain injury, I find Joe to be better prepared intellectually for graduate work than many of my students.

Finally, a word about modern technology: Joe says he can't imagine having accomplished all this without a computer. I say Amen to that! The internal logic of computer utilities fosters orderliness and organization. The "save" functions of the various word processing programs are a lifeline for those with memory problems. The Internet offers instant access to a world that, without it, can be painfully difficult to navigate.

There is one more important fact to mention. Mr. Mucci buys the finest of coffees and makes a mean cup. Maybe that's why they call him Jo-Jo.

TBI: How Society Closes Doors by Opening Them

By: Joe Mucci, BA, with Thomas Felicetti, Ph.D.

As stated in my companion article in Beechwords, my name is Joe. I am 47 years old and have lived with the effects of brain injury for 16 years. These effects have not improved my temper or organization and have especially impeded my physical functioning. I am confined to a wheelchair and have essentially only one good hand.

Before my accident when I heard the words "brain injury," I thought of a person sitting, twitching and convulsing in a chair with connectors and wires coming out of his or her head.

But now I realize that I am able to get out into the community and that it really helps my rehabilitation to socialize with the townspeople.* It is important for me to converse with them, to let them know I have a mind.

This helps me to buy my own coffee at the local market and feel good about myself. It also educates the people I meet about disability. Reducing ignorance in the community helps all handicapped people and sometimes results in fixing problems like the lack of accessibility, lack of ramps, etc. Sometimes, when you are accepted in the local community, you can help bring about changes with a phone call to the right person.

Just talking to people and interacting with them is not enough! I am especially aware of **how** I deal with people. This is even truer when good people are trying to be **nice** to me because of my disability.

Take opening doors, for instance. When people in town try to be nice to me by picking up something I drop or opening a door. I tell them "I've got it!". To them, opening a door is a simple action, but to me it's a hard-learned skill. It took me a long time to train myself. For a non-disabled person, the steps in door opening are taken for granted, but for me every step is planned. First, I have to get my good hand to push open the door, then quickly use the same hand to propel my chair. I have to move very quickly before the door closes using my good right foot at the same time. That door jam is the killer!

For a long time, I'd do everything right, but not get enough momentum to roll over the jam. The door would slam in my face or worse still, I'd get wedged in the doorway. This is embarrassing, as I am a pretty large guy.

So, even this simple act has been an adjustment to me. My body and mind changed after the injury. I've had to adjust to that change, and I also needed to accept the fact that I was different than before. I had to buy into the whole idea of rehabilitation, and I had to understand the value of getting out into the community.

This was not easy, and it still is not.

Studies show that the fewer human connections we have at home, at work, and in the community, the more likely we are to get sick, flood our brains with anxiety-causing chemicals and die prematurely.¹

The radical notion that human connections affect human biology was first demonstrated by a groundbreaking study of some 7,000 people in Alameda County, CA. The researchers found that those with the fewest connections to family, friends, community, and religious institutions were three times more likely to die over the 9 years in which the study was conducted. Most amazing, those who had the most connections lived significantly longer, even if they smoked, drank, or lived on bacon cheeseburgers.²

The Alameda study has since been replicated throughout the world. Other studies have found that, even when you have a deadly disease, being connected prolongs your life. In one, for example, women with incurable breast cancer who maintained close connections with others actually lived twice as long as those who kept to themselves.³

Researchers who monitored 276 people between the ages of 18 and 55 found that those who had six or more connections were four times better at fighting off the viruses that cause colds.⁴

How can a smile, a handshake or five minutes of chatter keep cells functioning, blood moving, and hearts beating? "That's what we don't know", admits Dr. Halowell, "but it does and the how is still a mystery."⁵



WELCOME JOSEPH O'BRIEN, PROGRAM ADMINISTRATOR

We are pleased to welcome Joseph O'Brien as the new Program Administrator for Beechwood New Jersey. Joe comes to Beechwood with a varied and extensive experience in the field of Human Services. Joe came to Beechwood from Durand Academy, Woodbury, NJ, where he was the Director of Community Services. His experience also includes Employment Specialist with Associated Services for the Blind and as a Vocational Education Teacher at the Overbrook School. In addition, he was the residential supervisor with Spin (Special People in the Northeast). Joe holds a BA in Education from Slippery Rock University of Pennsylvania. He is married, has four children and resides in Philadelphia.

* Some research and statistics to back up my thoughts on the importance of community connection.

¹ "Reconnect" by Ellen Michart, Prevention December 2000, pages 122 - 129.

² IBID

³ IBID

⁴ IBID

⁵ IBID

QUALITY ASSURANCE OUTCOMES Beechwood New Jersey

Beechwood Center of New Jersey is committed to providing high quality services to individuals who have received a traumatic brain injury. It is an on-going mission that requires on-going evaluation and re-evaluation of the services we provide.

Beechwood Center of New Jersey has put into practice our Information and Outcomes Management System (IOM) for the purpose of measuring our organization's performance in the delivery of services. This system of quality assurance is implemented two times a year to ensure that the services our organization excels in providing are maintained at a high level and areas of need are addressed in a timely manner.

As one component to this system, BCNJ conducts satisfaction surveys of the individuals we serve, their families and the funders of services to establish an understanding of where we are succeeding in our mission and where we need to improve.

The responses to this survey are at the core of our program evaluation. Who better to determine the success of a program than those individuals for whom the program exists? Although these surveys are not the sole instrument by which we measure success or failure, they relate directly to our desire to provide a person-centered program which looks at each person as an individual and their unique needs.

Our survey conducted in January 2001 resulted in an overall client satisfaction rating of 6.7 out of a possible 9, indicating a general sense of satisfaction from the people we serve but also revealing room for improvement in areas that have been identified by the management team of BCNJ. The family satisfaction survey resulted in an overall satisfaction rating of 7.36 and the funder satisfaction survey resulted in a score of 7.0. As a whole, this indicates to our management team that we are meeting the needs of our clients, their families and our funding sources.

Joseph O'Brien
Program Administrator
Beechwood, New Jersey

Beechwood

Rehabilitation Services
469 East Maple Avenue
Langhorne, PA 19047

Non-Profit Org.
U.S. POSTAGE
PAID
Langhorne, PA
Permit No. 27